

Family Information Form

Rosewood Academy - Family Based Home Education Program

(Fill out ALL Information)

Parent/Guardian
Name _____

Address _____ City/zip _____

—

County _____ Phone _____

Email _____

—

Student information

Name	Age/Birth Date	Grade
------	----------------	-------

Pease read thoroughly

- ÿ I have read the guidelines and policies of RWA and understand/agree with them.
- ÿ I understand the enrollment fee is \$65 due upon enrolling with RWA and there is no refund if we leave the school at any time nor are books included in this fee.
- ÿ I understand there is a \$30 per child transfer fee for leaving RWA in the middle of the school year.
- ÿ I understand RWA policy on student records and transcripts.
- ÿ I will keep RWA informed of new phone numbers or address changes.
- ÿ I understand that if a child moves in with another parent, enrollment does not transfer.
- ÿ I do not hold RWA, the administrator, staff members or volunteers liable for the education of my child, including purchasing of curriculum, grading or testing.
- ÿ I understand I am responsible of purchasing or obtaining all books or curriculum.
- ÿ I understand RWA is not state accredited nor wishes to be at anytime.
- ÿ I understand RWA fully places all responsibility of the education of my child on me, the parent. RWA is not required by law to make sure a child is learning.

Parent/Guardian Signature

Date

